

PART B - FEE(S) TRANSMITTAL

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Commissioner for Patents
P.O. Box 1450
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12/24/2003

LUMEN INTELLECTUAL PROPERTY SERVICES, INC.
2345 YALE STREET, 2ND FLOOR
PALO ALTO, CA 94306

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Elena Torres	(Depositor's name)
Elena Torres	(Signature)
3/22/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/896,900	06/28/2001	Butrus Thomas Khuri-Yakub	S00-038	1532

TITLE OF INVENTION: MICRO-MACHINED COUPLED CAPACITOR DEVICES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	03/24/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
TRAN, MAI HUONG C	2818	257-415000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 LUMEN INTELLECTUAL
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

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Please check the appropriate assignee category or categories (will not be printed on the patent);

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☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies 3

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☒ Payment by credit card. Form PTO-2038 is attached.☐ The Director is hereby authorized to charge the required fee(s), or credit any overpayment Deposit Account Number _____ (enclose an extra copy of this form).

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(Date)

3-22-04

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03/26/2004 HBERHE1 00000033 09896900

01 FC:2501
02 FC:1504
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300.00 OP
9.00 OP



TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/896,900	
	Filing Date	06/28/2001	
	First Named Inventor	Butrus Thomas Khuri-Yakub	
	Art Unit	2818	
	Examiner Name	Mai Huong C. Tran	
Total Number of Pages in This Submission	4	Attorney Docket Number	S00-038/US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Issue Fee Transmittal
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Ron Jacobs, Ph.D. Reg. No. 50,142	
Signature		
Date	3-22-04	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Elena Torres	
Signature		Date 3/22/04

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL

Application Number:	09/896,900
Filing Date:	06/28/2001
First Named Inventor:	Butrus Thomas Khuri-Yakub
Title of Invention:	Micro-Machined Coupled Capacitor Devices
Group Art Unit:	2818
Examiner:	Mai Huong C. Tran
Attorney Docket No.:	S00-038/US

Fee Calculation:

for ☐ Large Entity / ☒ Small Entity.

Basic Billing Fee:

☐ Utility Patent Application: \$740 / \$370 \$

☐ Provisional Patent Application: \$160 / \$80 \$

Claims:

☐ Number of Total Claims Over 20: ☐ x \$18 / \$9 = \$

☐ No. of Independent Claims Over 3: ☐ x \$84 / \$42 = \$

Other Fees:

☐ Extension of time, 1 month \$110 / \$55 \$

☐ Extension of time, 2 months \$400 / \$200 \$

☐ Extension of time, 3 months \$920 / \$460 \$

☐ Extension of time, 4 months \$1440 / \$720 \$

☐ Missing Parts Surcharge (Regular Application) \$130 / \$65 \$

☐ Missing Parts Surcharge (Provisional Application) \$50 / \$25 \$

☒ Publication Fee \$300 \$300

☒ Issue Fee \$1330 / \$665 \$665

☒ Printed Patent; Number of Copies: [3] x \$3 = \$9


TOTAL PAYMENT: \$974

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Signature of Applicant, Attorney, or Agent


Ron Jacobs, Ph.D., Reg. No. 50,142

3-22-04
Date